



Research Institute

APPLICATION FOR STUDENT EMPLOYMENT

PLEASE PRINT OR TYPE ALL INFORMATION.
DO NOT USE PENCIL. ATTACH ADDITIONAL PAGES IF NECESSARY.

CHECK THE TYPE OF POSITION(S) FOR WHICH YOU ARE APPLYING:

- STUDENT ASSISTANT
 UNDERGRADUATE COOPERATIVE
 STUDENT INTERNSHIP
 GRADUATE ASSISTANT
 GRADUATE RESEARCH ASSISTANT
 GRADUATE COOPERATIVE

CHECK TYPE(S) OF STUDENT EMPLOYMENT YOU ARE SEEKING: <input type="checkbox"/> RESEARCH <input type="checkbox"/> TECHNICAL <input type="checkbox"/> ADMINISTRATIVE/CLERICAL				
NAME (LAST, FIRST, MIDDLE)			GTID# (if applicable)	
PRESENT ADDRESS , TELEPHONE NUMBER, AND E-MAIL ADDRESS			PERMANENT ADDRESS AND PHONE NUMBER (IF DIFFERENT)	
ARE YOU A CITIZEN OF THE UNITED STATES? IF NO, PLEASE GIVE VISA TYPE:			GEORGIA TECH CAMPUS BOX NUMBER:	
DO YOU CURRENTLY WORK ON CAMPUS (), OR HAVE YOU WITHIN THE LAST YEAR ()? IF SO, IN WHICH DEPARTMENT/LAB/UNIT? IF NATURALIZED CITIZEN, STATE DATE, PLACE OF NATURALIZATION AND NATURALIZATION CERTIFICATE NUMBER:			NUMBER OF HOURS PER WEEK YOU ARE AVAILABLE TO WORK:	
LIST ANY RELATIVES CURRENTLY EMPLOYED BY GEORGIA TECH AND GIVE RELATIONSHIP:				
	NAME OF SCHOOL CITY AND STATE	DATES ATTENDED	GRADE POINT AVERAGE	DEGREE(S) AWARDED AND/OR RELEVANT COURSES
HIGH SCHOOL		FROM TO		
COLLEGE OR TECHNICAL		FROM TO		
		FROM TO		
DEGREE YOU ARE NOW PURSUING AND IN WHAT DISCIPLINE (E.G., BSEE, MS PHYSICS, ETC.):			CURRENT ACADEMIC YEAR AND SEMESTER (E.G. 2ND SEMESTER SOPHOMORE):	
ULTIMATE ACADEMIC GOAL:				
DESCRIBE ANY OTHER SIGNIFICANT EDUCATIONAL AND PROFESSIONAL EXPERIENCES, EXPAND ON INFORMATION ABOVE, AND/OR INDICATE PLANS FOR CONTINUING EDUCATION: (ATTACH SHEETS IF NECESSARY)				
LIST COURSES YOU HAVE TAKEN THAT ARE PERTINENT TO RESEARCH AND DEVELOPMENT: (ATTACH SHEETS IF NECESSARY)				
LIST COMPUTER HARDWARE, SOFTWARE AND LANGUAGES WITH WHICH YOU ARE FAMILIAR: (ATTACH SHEETS IF NECESSARY)				
DESCRIBE ANY HONORS AND SPECIAL RECOGNITIONS THAT YOU HAVE RECEIVED (ATTACH SHEETS IF NECESSARY)				
YEAR	AWARD AND/OR ORGANIZATION		BASIS OF SELECTION	
LIST PRESENT OR PAST MEMBERSHIPS AND POSITIONS OF LEADERSHIP IN PROFESSIONAL ASSOCIATIONS OR HONOR SOCIETIES (ATTACH SHEETS IF NECESSARY)				
DATE	NAME OF ORGANIZATION		TITLE OR POSITION	

LIST PERSONS WHO HAVE KNOWLEDGE OF YOUR EDUCATION, EXPERIENCE, AND CAPABILITIES				
NAME				
STREET				
CITY & STATE				
POSITION				
PHONE NO.				
WORK HISTORY - - LIST MOST RELEVANT EXPERIENCE (INCLUDE CO-OP WORK EXPERIENCE, IF ANY).				
NAME AND ADDRESS OF EMPLOYER	POSITION HELD - BRIEF DESCRIPTION	EMPLOYMENT DATES	SALARY RECEIVED	
		FROM	BEGIN.	
		TO	END	
SUPERVISOR:				
REASON FOR LEAVING:				
NAME AND ADDRESS OF EMPLOYER	POSITION HELD - BRIEF DESCRIPTION	EMPLOYMENT DATES	SALARY RECEIVED	
		FROM	BEGIN.	
		TO	END	
SUPERVISOR:				
REASON FOR LEAVING:				
MAY WE CONTACT YOUR PRESENT EMPLOYER?		WHEN COULD YOU BEGIN WORK?		
HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE?		IF YES, PLEASE EXPLAIN.		
MILITARY SERVICE DATES FROM - TO	BRANCH OF SERVICE	TYPE OF DISCHARGE	PRESENT RESERVE STATUS	SELECTIVE SERVICE CLASSIFICATION
HAVE YOU EVER HELD A SECURITY CLEARANCE?		HAVE YOU EVER HAD A SECURITY CLEARANCE DENIED, SUSPENDED, OR REVOKED?		
HIGHEST CLEARANCE HELD	GRANTING AGENCY	EMPLOYER		DATES FROM - TO
CHECK THE GTRI LOCATION(S) WHERE YOU ARE AVAILABLE TO WORK:				
<input type="checkbox"/> CAMPUS <input type="checkbox"/> GTRI-COBB COUNTY <input type="checkbox"/> GTRI-HUNTSVILLE, ALABAMA				

THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION AND ON SUPPLEMENTARY SHEETS IS ACCURATE TO THE BEST OF MY KNOWLEDGE. NO SIGNIFICANT INFORMATION HAS BEEN OMITTED, AND I UNDERSTAND THAT ALL INFORMATION IS SUBJECT TO VALIDATION AND/OR VERIFICATION BY THE GEORGIA INSTITUTE OF TECHNOLOGY.

SIGNATURE: _____ DATE: _____

MAIL COMPLETED APPLICATION TO: Personnel Support Team, Georgia Tech Research Institute, 430 Tenth Street, North Building, Room 117, Atlanta, Georgia 30332-0807. **FAX TO:** 404-894-3446